PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

12

097-47535.

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS					1			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			】(minus 20=		· 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		· 0			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PI			RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	· '	710,00	
CLAIMS AS AMENDED - PART II								'			OTHER	THAN
(Column 1)			grand annual contracting the special s	(Colu				SMALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	+135=		OR	+270=	· · · · · · · · · · · · · · · · · · ·
								TOTAL			TOTAL	
ADDIT. FEE												
_		(Column 1)			mn 2) HEST	(Column 3	<u>}</u> ,					* .
AMENDMENT B	i	REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL AIM	=	1	X40=		OR	X80=	
	FINSI PRESE	NTATION OF M	ULTIPLE DEF	CLAIM	AIM		+135=	334	OR	+270=		
,			•		Aug. 1.1	•		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
e Jaka		(Column 1)		(Colu	mn 2)	(Column 3	<u>)</u>			: 54.1 : 74.		n inda Silang law
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	> **		=		X\$ 9=		OR	X\$18=	7
	Independent	*	Minus	***	in the state of th			X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1			OR		
If the entry in column 1 is less than the entry in column 2; write "0" in column 3.								+135=		OR	, _* +270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT: FEE	
		nher Previously P						und in the an	omoriate bo	x in co	olumn 1	